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## \*BIBDATASHEET\*

CONFIRMATION NO. 6707

Bib Data Sheet

|  |   |                               |   |   |
|--|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>09/886,167   | <b>FILING OR 371(c) DATE</b><br>06/20/2001<br><b>RULE</b>   | <b>CLASS</b><br>707           | <b>GROUP ART UNIT</b><br>2163   | <b>ATTORNEY DOCKET NO.</b><br>IREA0002C |
| <b>APPLICANTS</b><br>Thomas C. Poff, Los Altos, CA;<br>John Shigeto Minami, San Jose, CA;<br>Ryo Koyama, Palo Alto, CA;  |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 08/965,540 11/06/1997 PAT 6,330,659<br>and claims benefit of 60/045,951 05/08/1997   |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 07/13/2001</b>   |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>20   | <b>TOTAL CLAIMS</b><br>37               |
| <b>INDEPENDENT CLAIMS</b><br>5   |   |                               |   |   |
| <b>ADDRESS</b><br>28875  |   |                               |   |   |
| <b>TITLE</b><br>HARDWARE ACCELERATOR FOR AN OBJECT-ORIENTED PROGRAMMING LANGUAGE   |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>1088   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |